| 1 | Case 16-21770 | Doc 1 | Filed 07/06/16 | | 07/06/16 13:50:18 | Desc Main |
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| Fill in this inf | ormation to identify yo | our case: | Ukacament | Page 1 o | | LED |
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| Official F | orm 101 | | | | | |
| Volunt | ary Petitio | on for | Individual | s Filin | g for Bankı | 'uptcy 12/15 |
| Debtor 2 to dis same person m Be as complete information. If (if known). Ans | tinguish between then nust be <i>Debtor 1</i> in all e and accurate as poss | n. In joint case of the forms. sible. If two m | es, one of the spouses arried people are filing | must report in together, boti | nformation as <i>Debtor 1</i> ar | the form uses <i>Debtor 1</i> and defined the other as <i>Debtor 2</i> . The for supplying correct rite your name and case number |
| | Ab | out Debtor 1 | | | About Debtor 2 (Spo | use Only in a Joint Case): |
| 1. Your full n | | § | | | 8 | |
| government- | me that is on your issued picture | Fuad | | | | |
| identification your driver's | (tor example, | st name | | | First name | |
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| Bring your pi identification with the trus | to your meeting Las | st name | (C/ | | Last name | All the second s |
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Filed 07/06/16 Entered 07/06/16 13:50:18 Desc Main Page 2 of 10 Document Debtor 1 Case number (if known) About Debtor 2 (Spouse Only in a Joint Case): Any business names MI have not used any business names or EINs. and Employer ☐ I have not used any business names or EINs. **Identification Numbers** (EIN) you have used in the last 8 years Business name Business name Include trade names and doing business as names Business name Business name 5. Where you live If Debtor 2 lives at a different address: Golf Rd #611 City ZIP Code County County If your mailing address is different from the one If Debtor 2's mailing address is different from above, fill it in here. Note that the court will send yours, fill it in here. Note that the court will send any notices to you at this mailing address. any notices to this mailing address. Number Street Number Street P.O. Box P.O. Box City State ZIP Code City State ZIP Code 6. Why you are choosing Check one: Check one: this district to file for Over the last 180 days before filing this petition, Over the last 180 days before filing this petition, bankruptcy I have lived in this district longer than in any I have lived in this district longer than in any other district. other district. I have another reason. Explain. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) (See 28 U.S.C. § 1408.)

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Debtor 1

Case number (if known)

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| 6.40 | - | | |
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Tell the Court About Your Bankruptcy Case

| 7. | The chapter of the Bankruptcy Code you are choosing to file under | Cha | k one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing inkruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. hapter 7 hapter 11 hapter 12 | | | | | |
|----|---|----------------------------|--|--|---|--|--|--|
| 8. | How you will pay the fee | loca you sub with | Il court for self, you mitting you a pre-pri | or more details at may pay with ca pur payment on y inted address. | oout how you n ash, cashier's c your behalf, you | nay pay. Typical check, or money ur attorney may u choose this or | neck with the clerk's office in your lly, if you are paying the fee order. If your attorney is pay with a credit card or check otion, sign and attach the | |
| | | By la less | tuest tha aw, a judo than 150 the fee in | at my fee be wai ge may, but is no 0% of the official n installments). If | ived (You may ot required to, v poverty line that fyou choose th | request this opt waive your fee, a at applies to you is option, you m | tion only if you are filing for Chapter 7. and may do so only if your income is ur family size and you are unable to nust fill out the Application to Have the with your petition. | |
| 9. | Have you filed for bankruptcy within the last 8 years? | ¥No □ Yes. | District _ | | When | MM / DD / YYYY | Case number | |
| | | | District | | | MM / DD / YYYY | Case number | |
| | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an | ☑ No ☐ Yes. | Debtor | | When | MM / DD / YYYY | Relationship to you Case number, if known | |
| | affiliate? | | Debtor | | When | MM / DD / YYYY | Relationship to you Case number, if known | |
| | Do you rent your residence? | ☐ Nø. ☑ Yes. | No. G | landlord obtained e? So to line 12. | ment About an E | | and do you want to stay in your Against You (Form 101A) and file it with | |

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|------|-------------------------|--|-----------------------------------|------------------------------------|---|---|--|--|--|
| De | btor 1 | First Name Middle Nam | ne e | / (C | RARAG | Case number (if known) | | | |
| | | | | | | | | | |
| Pa | art 3: | Report About Any E | Busines | ses You | ı Own as a Sole Pro | prietor | | | |
| 42 | Are voi | ı a sole proprietor | m/ | Go to Pa | | | | | |
| 12. | of any f | ull- or part-time | | | | | | | |
| | busines A sole pr | oprietorship is a | ☐ Yes | . Name a | ind location of business | | | | |
| | business individua | you operate as an I, and is not a legal entity such as | | Name of | business, if any | | | | |
| | | ition, partnership, or | | Number | Street | | | | |
| | If you ha | ve more than one | | | | | | | |
| : | separate | rietorship, use a sheet and attach it | | | | | | | |
| | to this pe | tition. | | City | WW. 1944 | State ZIP Code | | | |
| | | | | | | | | | |
| | | | | | he appropriate box to de | • | | | |
| | | | | | | efined in 11 U.S.C. § 101(27A)) s defined in 11 U.S.C. § 101(51B)) | | | |
| | | | | | ckbroker (as defined in 1 | • | | | |
| | | | | | | ed in 11 U.S.C. § 101(6)) | | | |
| | | | | | e of the above | | | | |
| | -h | | | | 17 17 17 A 1 N N N N N N N N N N N N N N N N N N | | Management of the Section for the Section Sect | | |
| 13. | Chapter Bankru | filing under 11 of the otcy Code and a small business | can set most red any of the | appropria cent bala nese doc | ate deadlines. If you indi nce sheet, statement of uments do not exist, follone | urt must know whether you are a small busin icate that you are a small business debtor, you operations, cash-flow statement, and federal ow the procedure in 11 U.S.C. § 1116(1)(B). | ou must attach vour | | |
| | | nition of small | | | filing under Chapter 11 | | | | |
| | | debtor, see § 101(51D). | ∟ No. | I am filir the Ban | ig under Chapter 11, bu kruptcy Code. | t I am NOT a small business debtor accordin | g to the definition in | | |
| | | | Yes. | I am filin Bankrup | ng under Chapter 11 and otcy Code. | r Chapter 11 and I am a small business debtor according to the definition in the de. | | | |
| | rt 4: | amout if You Our | | A 11_ | | | m | | |
| | Neth N | eport ir Tou Own o | ir nave | Апу па | zardous Property of | Any Property That Needs Immediat | e Attention | | |
| | | own or have any | ™ No | | | | | | |
| | | that poses or is to pose a threat | | What is | s the hazard? | | | | |
| | of immi | nent and | | | *************************************** | | | | |
| | | ble hazard to ealth or safety? | | | <u></u> | | | | |
| | Or do yo | ou own any that needs | | | | | | | |
| | | ite attention? | | If imme | ediate attention is neede | d, why is it needed? | - T - T - T - T - T - T - T - T - T - T | | |
| | perishabli that must | ole, do you own e goods, or livestock be fed, or a building s urgent repairs? | | | | | | | |
| | | | | Where | is the property? | Otto | ************************************** | | |
| | | | | | Number | r Street | | | |
| | | | | | *************************************** | | | | |
| | | | | | | | The Day | | |
| | | | | | City | State | ZIP Code | | |
| Offi | cial Form | 101 | | Volunta | ary Petition for Individe | uals Filing for Bankruptcy | page 4 | | |

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Tuad R Haddad St Name Middle Name Last Name

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Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

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|---|---|---|----|---|---|----|---|----|---|---|---|
| | | | | | | | | | | | |
| | | | | | | | | | | | |

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| Ш | I am not required to receive a briefing | about |
|---|---|-------|
| | credit counseling because of: | |

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

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Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

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| I am not required to receive a briefing abo | out |
|---|-----|
| credit counseling because of: | |

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Case number (if known Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts do as "incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. Mo. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under ☐ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and Do you estimate that after administrative expenses are paid that funds will be available to distribute to unsecured creditors? any exempt property is excluded and M No administrative expenses ☐ Yes are paid that funds will be available for distribution to unsecured creditors? 18. How many creditors do **Y** 1-49 1,000-5,000 **25.001-50.000** you estimate that you 50-99 5,001-10,000 50,001-100,000 owe? 100-199 10,001-25,000 More than 100,000 200-999 19. How much do you \$0-\$50,000 41,000,001-\$10 million □ \$500,000,001-\$1 billion estimate your assets to □ \$10,000,001-\$50 million \$50,001-\$100,000 ■ \$1,000,000,001-\$10 billion be worth? \$100,001-\$500,000 □ \$50,000,001-\$100 million \$10,000.000.001-\$50 billion □ \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion 20. How much do you \$0-\$50,000 □ \$1,000,001-\$10 million \$500,000,001-\$1 billion estimate your liabilities \$50,001-\$100,000 □ \$10,000,001-\$50 million □ \$1,000,000,001-\$10 billion to be? \$100,001-\$500,000 \$50,000,001-\$100 million □ \$10,000,000,001-\$50 billion □ \$500,001-\$1 million □ \$100,000,001-\$500 million ☐ More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Signature of Debtor 2 Executed on O Z Executed on MM / DD / YYYY

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Desc Main

Case 16-21770

| ebtor 1 First Name Middle Nar | B Haddad ne Last Name | Page 7 of 10 Case number (if known) | |
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| or your attorney, if you are epresented by one you are not represented y an attorney, you do not | I, the attorney for the debtor(s) named i to proceed under Chapter 7, 11, 12, or available under each chapter for which the notice required by 11 U.S.C. § 342(knowledge after an inquiry that the information of the state of the | 13 of title 11, United States Code, and the person is eligible. I also certify the b) and, in a case in which § 707(b)(4) | d have explained the relief at I have delivered to the debtor(s (D) applies, certify that I have no |
| eed to file this page. | X | Date | |
| | Signature of Attorney for Debtor | Date | MM / DD /YYYY |
| | Printed name | | |
| | Firm name | | |
| | Number Street | | |
| | City | State | ZIP Code |
| | Contact phone | Email address | |
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| | if you are filing this tcy without an | should understand that many puthemselves successfully. Because | lual, to represent yourself in bankru people find it extremely difficult to nuse bankruptcy has long-term fi ly urged to hire a qualified attorn | o represent nancial and legal | | | | |
| an attorn | e represented by ley, you do not ile this page. | To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay. | | | | | | |
| | | court. Even if you plan to pay a par in your schedules. If you do not list property or properly claim it as exer also deny you a discharge of all you case, such as destroying or hiding cases are randomly audited to deter | debts in the schedules that you are reticular debt outside of your bankruptor a debt, the debt may not be dischargent, you may not be able to keep the ur debts if you do something dishone property, falsifying records, or lying. It ermine if debtors have been accurate, ime; you could be fined and impris | ey, you must list that debt led. If you do not list property. The judge can st in your bankruptcy ndividual bankruptcy truthful, and complete. | | | | |
| | | hired an attorney. The court will not successful, you must be familiar with | ney, the court expects you to follow the treat you differently because you are the the United States Bankruptcy Code at rules of the court in which your cas in laws that apply. | e filing for yourself. To be e, the Federal Rules of | | | | |
| | | Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences? | | | | | | |
| | | □ No □ Yes | | | | | | |
| | | Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned? | | | | | | |
| | | ☑ No☑ Yes. Name of Person | ne who is not an attorney to help you | | | | | |
| | | By signing here, I acknowledge that | reparer's Notice, Declaration, and Signal I understand the risks involved in filince, and I am aware that filing a bankri | ng without an attorney. I | | | | |
| | × | | rights or property if I do not properly h | | | | | |
| | | Signature of Debtor 1 | Signature of Debte | or 2 | | | | |
| | | Date 07 06 2016 MM/DD /YYYY | Date | MM / DD / YYYY | | | | |
| | | Contact phone | Contact phone | | | | | |
| | | Cell phone $\frac{708 - 930}{Fh 82186}$ | | | | | | |

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

| In Re: Fuadh, Haddad |) | |
|----------------------|------|----------|
| |), c | |
| Debtor (s) |) | Case No. |
| Decitor (s) |) | Chapter |
| |) | |

List of Creditors

| Ramzi Dababneh | |
|--|-------------|
| 7935 fonderosa Court | |
| Urland rate, LL 60462 | |
| 708-606-7237 | |
| ALAN L. | abdian O.h. |
| 11301 S. Harlem Ave | Notice Only |
| Worth, IL 60482 708-598-4404 | |
| | |
| Capital One Bank USA | |
| PO BOX 30281 | |
| 3 alt Latie City, UT 84130 (800) 955-7070 | |
| (800) 955-7070 | |
| 1 C System (888) 735-0516 | |
| 1 PO Box 64378 | · |
| Saint Paul, MN 55164 | |
| South Subusban Neurology | |
| Medical Business Bureau | |
| 1460 henaissance Dr 400 | |
| Park Ridge, IL 60068 | |
| Swedish Emergency Assoc. | |
| (847) 954-4208 | |

Case 16-21770 Doc 1 Filed 07/06/16 Entered 07/06/16 13;50:18 Pesc Main Document Page 10 of 10 Haddad Debtor 1 (847)954-4200 Medical Business Bueau 1460 henaissance Dr 400 Park Ridge, Il 60068 Swedish Covenant Hospital Creditors Collection (888) 400-400-6078 PO Box 63 Ave Kankiahee, Il 60901 Assoc St. James Radiologists US Department of Education Navient PD Box 9500 Wilhes Barre, PA 18773 Dept. of ED/ Nelnet